

12247

Campaign Finance Disclosure Statement

State of South Dakota

Appendix B

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S.D. SEC. OF STATE

County, municipal and school candidates file in the office where you filed your nominating petition. Statewide PACs, political party, ballot question and other committees file statement with the Secretary of State's Office.

Mail to Secretary of State's Office, Election Department, 500 E Capitol Ave., Ste. 204, Pierre, SD 57501-5070 or fax to 605-773-6580. To obtain an email address call 605-773-3537. Fax and email images must contain the signature and the original must be filed in our office within one week following the date the fax/email was received.

See pages 43-45 of the Guideline Book for specific instructions on completing this report.

Name of Committee HAL G. WICK

Complete Street and Postal Address 3009 Donahue Drive Sioux Falls S.D. 57105

Name of Person Making Report LARRY RITZ

Daytime Phone Number 605) 367-6752 Evening Phone Number 605) 332-2106

Email Address Ritz2@Sio.MD.CO.NET

If you are a candidate, what office are you seeking? State House Seat District 12

If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.

Type of Campaign Statement POST-GENERAL Year-End
Pre-election (pre-primary, pre-general), year-end, mid-year (mid-year for ballot questions committees only), amendment, supplement or termination

The following verification must be completed before submitting report.

.....
VERIFICATION OF PERSON MAKEING REPORT

I LARRY RITZ (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer responsible for filing to a civil penalty of fifty dollars per day for each day that the statement remains delinquent.

Date: 1-11-2011

Larry Ritz
Signature of Treasurer

Filed this 13 day of January, 2011
Jason Sant
SECRETARY OF STATE

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and enter this sum as unitemized contributions on the first line below. Any contribution of more than \$100 or aggregate during a calendar year from an individual and all contributions from political parties and PAC's must be entered as a separate item (itemized) giving the amount, name, residence address, city and state of the contributor. Any contribution from a federal political committee or political committee organized outside this state shall also include the name and internet website address of the filing office where the committee regularly files. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

*\$ 390.00

Itemized Contributions from Individuals

[illegible]

*\$ 500.00

Schedule A – Direct Contributions (continued)

Itemized Contributions from Political Parties

| Party Name | Address | \$ |
|------------|---------|----|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | \$ |

Total of Itemized Contributions from Political Parties:

*\$

Itemized Contributions from South Dakota Political Action Committees (PAC's) or South Dakota Candidate Committees - All contributions must be itemized.

| PAC Name | Address | \$ |
|--|--|-------------|
| SD TRUCKING PAC | PO BOX 89008 | 350.00 |
| SD Health CARE ASSN PAC | 804 NORTHWESTERN AVE SIOUX FALLS SD 57104 | 300.00 |
| Qwest SD PAC | 125 SD AVE SIOUX FALLS SD 57194 | 200.00 |
| SD Retailers ASSN PAC | PO BOX 638 Pierre SD 57501 | 500.00 |
| SD PHYSICAL Therapy ASSN PAC | PO BOX 88033 SIOUX FALLS SD 57109 | 100.00 |
| SD ASSOC OF SPECIALTY CARE PROVIDERS PAC | 1868 LOMBARDY DR RAPID CITY SD 57703 | 250.00 |
| SD MEDICAL GP MGMT ASSOC - PAC | SIOUX FALLS, SD 57105 | 200.00 |
| NORTHWESTERN ENERGY EMPLOYEES PAC | PO BOX 1318 Huron SD 57350 | 200.00 |
| SD ACADEMY OF OPHTHAL- MOLOGY EYE MD PAC | 6601 DOMIN AVE SIOUX FALLS SD 57108 | 100.00 |
| Total Contributions from South Dakota Political Action Committees and South Dakota Candidate Committees: | | *\$ 2300.00 |

| Party Name | Address | |
|--------------------------------|--|-----------|
| LINCOLN COUNTY GOP | 27856 452nd AVE CANTON SD 57013 | \$ 250.00 |
| SIoux LAND REPUBLICAN WOMEN | 4912 S. Glenview RD SIoux Falls, SD 57108 | 150.00 |
| | | |
| | | \$ |

*\$ 350.00

[illegible]

*\$ 200.00

[illegible]**Total of All Direct Contributions (Sum of all lines with an *)**

Report all non-cash contributions of goods or services and the estimated fair market value. If the contribution is from a federal political committee or political committee organized outside this state list the name and internet website address of the filing office where the committee regularly files their campaign finance report.

| Description of Non-Cash Contribution | Name and Residence Address or Name and Internet Website Address | Estimated Value |
|---|---|-----------------|
| Printing, mailing Postage - State Coms | MIN CNTY Republican Party - 2127 SO MIN Ave Sioux Falls, SD 57105 | 399.57 |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total: | | 399.57 |

[illegible]

List a categorical description and the estimated value of funds or donations by any organization to its political committee for establishing and administering the political committee or solicitation costs of the political committee.

| Organization Name & Categorical Description for direct funds | Estimated Value |
|---|------------------------|
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| | |
| Total: | <i>None</i> |

| Expenses | | Contributions Made to Candidates and Committees | |
|--|----------------------------------|---|--------|
| Item | Amount | Name of Candidate or Committee | Amount |
| Advertising | 254.49 | | |
| Consulting | | | |
| Interest | | | |
| Office Supplies | 471.44 | | |
| Postage | 97.13 | | |
| Printing | 194.76 | | |
| Rent | | | |
| Salaries | | | |
| Telephone | | | |
| Travel | 1122.07 | | |
| Utilities | | | |
| List other expense items below | List other expense amounts below | | |
| Voter Lists | 104.94 | | |
| Gifts to Volunteers | 593.08 | | |
| DUES - AMERICAN LEGISLATIVE EXCHANGE COUNCIL | 1000.00 | | |

3448.09

[illegible]

NOTE

| Name of Recipient of Loan, Street Address, City and State | Amount of Loan Made During the Reporting Period | Amount of Loan Repaid During the Reporting Period | Balance of Loan at the End of the Reporting Period |
|---|---|---|--|
| | | | |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |
| Totals | | | None |

Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

- | | | |
|---|-------------------|--------------------|
| Balance of cash and cash equivalents on hand, if any, at the beginning of | | |
| 1. the reporting period: | | \$ <u>2942.54</u> |
| 2. Receipts | | |
| Schedule A - Direct Contributions | \$ <u>4290.00</u> | |
| Schedule B - In-Kind Contributions | \$ <u>399.57</u> | |
| Schedule C - Other Income | \$ <u>None</u> | |
| Schedule D - Establishing/Administration of Committee | \$ <u>None</u> | |
| Total of all Receipts | \$ <u>4689.57</u> | |
| 3. Total Monetary Receipts (A+C) | | \$ <u>4290.00</u> |
| 4. Candidate's Personal Contribution to Own Campaign | | \$ <u>None</u> |
| 5. Monetary Loans to Candidate or Committee During Reporting Period | | \$ <u>None</u> |
| 6. Monetary Loans Repaid During Reporting Period | | \$ <u>None</u> |
| 7. Expenditures - Schedule E | | \$ <u>3448.09</u> |
| Debts & Obligations Owed by the | | |
| 8. Committee - Schedule F | \$ <u>None</u> | |
| Monetary Loans Made by the Committee During the | | |
| 9. Reporting Period - Schedule G | | \$ <u>None</u> |
| Monetary Loans Repaid to the Committee During the | | |
| 10. Reporting Period - Schedule G | | \$ <u>None</u> |
| 11. Amount on hand at the close of this reporting period. | | |
| This should equal lines (1+3+4+5+10) - (6+7+9) | | *\$ <u>3784.45</u> |

***Note: You cannot end the reporting period with a negative balance.**

County, municipal and school candidates file with the person in charge of the local election.

If you are a ballot question committee which received a contribution from an organization, please attach to this campaign finance disclosure statement, the Ballot Question Statement you received from the organization.